

09/943594

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.2		
O.I.P.E. CLASSIFIER			09/95-01
FORMALITY REVIEW	B2	10	
RESPONSE FORMALITY REVIEW	M.7	502-823	11-03-01
		625	12-16-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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12/20/01